BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

93196-00248

CLAIMS AS FILED - PART I					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			10				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			o minus 20=		*		Γ	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 2_			X42=		OR	X84=	168
MULTIPLE DEPENDENT CLAIM PRESENT							ľ	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L-	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AP4			X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	OLITPLE DE	ENUEN	I CLAIM			+140=	·	OR	+280=	
							<u> </u>	TOTAL ODIT. FEE	0	OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	_ ^L	JJII. FEE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9≅		OR	X\$18=	
	Independent	*	Minus	***		-	ΙT	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM	Ц	1	+140=		OR	+280=	
							<u>ι</u> ΔΓ	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)				-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	 	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				IT CLAIM		j -					
	If the entry in colu	ımn 1 is less than	the entry in col	umn 2. wri	te "O" in c	olumn 3.	L	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												<u> </u>
	The "Highest Nur	mber Previously P	aid For" (Total	or Indepen	dent) is th	e highest number	er foun	d in the ap	propriate bo	k in co	lumn 1.	